



APPLICATION FOR SPECIAL EVENT PERMIT

Please Return To

Parks and Recreation Department 50 Ida Lee Drive, N.W. Leesburg, VA 20176

Please Type or Print Clearly

Activity		Date of Application	
Sponsored By		Location of Event	
For Profit	Non-Profit	it Tax Exempt No	
Organizers/Contact:			
Name	Home #	Work #	
Address	City	State	Zip
Name	Home #	Work #	
Address	City	State	Zip
Description of Event:			
Date of Event		Rain Date	
Event Hours			
Set Up Time		Clean Up Time	

* Anticipated Attendance (Per Day): Participants	Spectators			
* Will You Need Electricity? Yes ☐ No ☐	(if Yes, Number of Outlets)			
* Will Food be Served? Yes □ No □				
* Will Fees for Food or Merchandise be Charged?	Yes □ No □			
* Will Admission Fees, Entry Fees or Other Fees be	e Charged as Part, or in Association			
with the Activity? Yes □ No □				
* Will Portable Restrooms be Provided? Yes 🗆	No ☐ (If Yes, How many)			
* Will There be Parking Control Staff? Yes □	No ☐ (If Yes, How many)			
* Will You Have Security on Site? Yes ☐ No	☐ (If Yes, Who)			
* Will Any Items be Left Overnight? Yes □	No ☐ (If Yes, What			
* Will Signs or Banners be Displayed? Yes □	No □ (If Yes, Where			
* Will Tents be Erected? Yes \(\sigma\) No \(\sigma\) (If	f Yes, What Size)			
* Will Water Hook-up be Needed? Yes • No •	(If Yes, What For			
* Will There be a Parade? Yes ☐ No ☐	(If Yes, Where)			
* Will any Town Streets Need to be Closed ? (If Yes, Identify				
Name of Insurance Company Providing Certificates	s of Insurance for the Event:			
I agree to indemnify and hold harmless the Town of agents from and against any and all liability for any connection with this event. I also hold harmless the and its agents form and against any liability for any damaged that are stored or otherwise as a result of t	injury which may be suffered in e Town of Leesburg, its employees, equipment or supplies lost or			
Signature	Date			